

RECEIVED  
CENTRAL FAX CENTER

JAN 04 2005

PTO/SB/21 (09-04)

Approved for use through 07/31/2006, OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

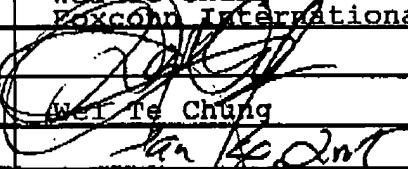
Total Number of Pages in This Submission

Application Number	10/052,809
Filing Date	11/02/01
First Named Inventor	David Li
Art Unit	2633
Examiner Name	LEUNG, CHRISTINA Y

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Wei Te Chung Foxconn International, Inc.		
Signature			
Printed name	Wei Te Chung		
Date	Jan 04, 2005	Reg. No.	43,325

## CERTIFICATE OF TRANSMISSION/MAILING

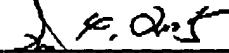
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

Wei Te Chung

Date



This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED  
CENTRAL FAX CENTER

Appl. No. 10/052,809  
Amtd. Dated Jan. 4, 2005  
Reply to Office Action of Oct. 4, 2004

JAN 04 2005

PATENT

***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

In re Application of:	)	Examiner:
David Li et al	)	LEUNG, CHRISTINA Y
	)	
Application No.: 10/052,809	)	Group Art Unit: 2633
	)	
Filed: 11/02/2001	)	Dated: Jan. 4, 2005
	)	
For: OPTICAL ADD-DROP	)	
MULTIPLEXER	)	

---

**CERTIFICATE OF FACSIMILE TRANSMITTED**

I hereby certify that this correspondence is being  
facsimile transmitted to: Commissioner for Patents,  
P.O. Box 1450 Alexandria, VA 22313-1450, on this

*[Signature]* at (703) 872-9306

Signed:

*[Signature]*  
Wei Te Cheng

**Honorable Commissioner for Patents  
Alexandria, VA 22313-1450**

Sir:

In response to the outstanding Office action mailed Oct. 4, 2004 in connection with the above-identified application, examination and consideration of the following amendments and remarks are respectfully requested.

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 7 of this paper.